CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

2005 APR -6 AM 9: 34

			2.00	110	
DATE OF REPORT 4/06/04 NAME OF CANDIDATE OR COMMITTEE EVENE LE R. Fair Child					
4/06/04	EVEREZZ	R. Fal			
b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE		
			8/01/0	2	
a. CAMPAIGN ADDRESS AND PHONE	city	State	Zip Code	Phone	
	,				
4704 Whispering Hi		X50K 7	¥ 37343	729-811-21	
b. CANDIDATE'S HOME ADDRESS (if different the Street or Rural Route		State	Zip Code	Phone	
	City	State	Zip Code	Filolie	
5 ame	- Eblox	NAME OF BOUTION	TDEACHDED /		
OFFICE SOUGHT (include district number, if ap			TREASURER (may be	candidate)	
School Board Distric	† 3	Bob Fre	eman		
CATEGORY OR REPORT (Check one)					
PRE-PRIMARY POST-PRIMARY	PRE-GENERAL	POST-GENERAL	SUPPLEMENTA	AL MENDED	
BEGINNING DATE OF REPORTING PERIOD	I 8h	ENDING DATE OF RE	PORTING PERIOD		
. Deciding brite of the online (ENOU	0.5.	ENDING DATE OF RE	. OTTING LENIOD		
(Check one)					
onder one)					
b. This campaign is required to file a detail and/or expenditures total more than \$1,000.	ed financial disclosure i	because contributions (i		d total more than \$1,000	
benefit of the candidate or for any other nonpo	4/6/04 date	Bakta	of political treasurer	4/26/04	
SWORN TO AND SUBSCRIBED BEFORE ME	N THE	SWORN TO AND	SUBSCRIBED BEFOR	F MF IN THE	
SWORN TO AND SUBSCRIBED BEFORE ME IN THE		SWORN TO AND SUBSCRIBED BEFORE ME IN THE			
STATE OF Sensessee		STATE OF	Legens ASS	700	
THIS 6 DAY OF THE PARIL	200€	THIS 26	DAY OF BRIL	2004	
O. J. STORY OF THE STATE OF THE		10-1	EG NO BYS	AZE O-	
MARTIN MANUELLES		(in	notary public		
A FT PUBLIC 10		-		Felles	
T/102 8, 2004		Sh	O notary public	Gelles	
		Ma	1 12 00 4.	Halles	
date completion expires		Ma	date commission exp	O Balles	
date complitation expires		Ma	date commission exp	es clus	
date computation expires		Ma	date commission exp	e Clus Wes	
date complesion expres		Ma	date communication expension expensi	Pa Clus	
a. BALANCE ON HAND LAST REPORT		Sha	date commission explanation with the commission explanation explan	es Clus	
a. BALANCE ON HAND LAST REPORT		Sha	date commission explanation with the commission explanation explan	es Clus	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD			date commission explanation (April 1997) Notary Seal \$ 1203.03	O The Clas	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD			date commission explanation (April 1997) Notary Seal \$ 1203.03	00.00	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD			date commission explanation (April 1997) Notary Seal \$ 1203.03	No Ne	
b. TOTAL RECEIPTS THIS PERIOD			date commission explanation (April 1997) Notary Seal \$ 1203.03	No Ne	

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Everett R. Fairchild	FROM: TO: (2/3//2)
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$
b. Itemized Contributions (over \$100 from each source this period)	\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s None
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ NONC
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ NONC
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 00.00
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category -	e.g., printing, postage, gasoline)
(Dupont Elementary PTA \$ 100.	00
STARS \$ 50.	<i>8</i> 0
Betholehem Center \$ 100.	00
United Way \$ 100.	00
(Bethel Bible Village \$ 50.	00
Bank Service Change (4@ 1250) \$ 50.	00
Postage \$ 28.4	3
\$	
\$	
	1199 15
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 60.80
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$
22.IN-KIND CONTRIBUTIONS	
Unitermized in-kind contributions (\$100 or less from each source this period) b. Itemized in-kind contributions (over \$100 from each source this period)	s Ne
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22	b.)ss
23. OBLIGATIONS	18/
a. Unitemized Obligations Outstanding (\$100 or less each) b. Itemized Obligations Outstanding (Over \$100 each)	s of DN
b. Itemized Obligations Outstanding (Over \$100 each)	\$ _/\u
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown I ite	m 12.f.)\$

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

 NAME OF CANDIDATE OR COMMITTEE 	NAME OF CANDIDATE OR COMMITTEE				REPORT COVERING THE PERIOD ,		
Everett R. Fairchild				FROM:	TO: 12/31/03		
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	URES FRO	OM PRECEDING PAG	SE (enter \$0 if first itemized pa	age)	Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR					riod)		
First Name	Middle Na	ите .	Purpose of Expenditure		Amount of Expenditure		
Margaret		ANN	D tien	EXPENSE.	4		
Last Name Business Name . Fair child		Kecepiion	· WACKE]			
Address 4704 Whispering Hills LA		Reception Sor Campa	194 00000	1			
CHYHIXSON		Zip Code 3/3/3	1		200.00		
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name HIX50N Middle Sc.	600/	Sports Boo	sters				
Address 5401 School			DONATIO	W			
City 30 400	State	Zip Code	1				
HIXSON		37343			200.00		
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Lostis Middle School	8005	ter club	DONE +10				
Address			DONSTI	~			
City	State	Zip Code	1				
HIXSON	TN	37343			200.00		
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1	,			
RONZIJ MO/DONZID HOUSE		DONATIO	4				
outeas							
City	State	Zip Code			125 -00		
					125		
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1				
Address			1				
City	State	Zip Code	-				
	U.anu	Ly cool					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1				
Address			1				
City	State	Zip Code	1				
		1 8					
TOTAL ITEMIZED EXPENDITURES (Carry forward to Hern 3. of next page If additional page)	of this form	we used)			725 00		
(If this is the last page of expenditures, this amount mu					- * FS		